

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

1445 Ross Avenue

Suite 1400



Check if different than previously reported. (ACC)

Dallas

TX

75202-2703

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00119354

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 01 2016

through

M M M / D D D / Y Y Y Y Y Y
09 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Plott, Todd, Mr.,

Type or Print Name of Treasurer

Signature of Treasurer

Plott, Todd, Mr.,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 09 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
09 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		98102.48
(b) Cash on Hand at Beginning of Reporting Period.....	106177.90	
(c) Total Receipts (from Line 19)	11732.12	125285.41
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	117910.02	223387.89
7. Total Disbursements (from Line 31).....	16750.00	122227.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	101160.02	101160.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8984.94	78287.41
(ii) Unitemized	2747.18	46998.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	11732.12	125285.41
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	11732.12	125285.41
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	11732.12	125285.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11732.12	125285.41

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	1200.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	1200.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	92600.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	-323.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	-323.00
29. Other Disbursements (Including Non-Federal Donations).....	12750.00	28750.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16750.00	122227.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16750.00	122227.87

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	11732.12	125285.41
34. Total Contribution Refunds (from Line 28(d))	0.00	-323.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11732.12	125608.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	1200.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	1200.87

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BANDY, HAROLD, , ,

Mailing Address 9004 OLD SMYRNA ROAD

City
BRENTWOODState
TNZip Code
37027-6058FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet HealthcareOccupation (for Individual)
Sr Director, IS Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1824.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AD72D4361154C449D82F

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOHNSTON, RICKY, , ,

Mailing Address 401 N.CHURCH ST

City
MCKINNEYState
TXZip Code
75069-3854FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet HealthcareOccupation (for Individual)
VP, Ops And Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A04C9833CEAC842CE916

Amount of Each Receipt this Period

90.00

☐ Memo Item

Payroll Deduction: \$45.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VARGAS, MONICA, C, ,

Mailing Address 4017 FLAMINGO

City
EL PASOState
TXZip Code
79902-1313FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PROVIDENCE SIERRA CAMPUSOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AD8DB70468516464C986

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

320.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 53
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHWARTZ, KEN, , ,

Mailing Address 3560 DALLAS PARKWAY

City
FRISCO

State
TX

Zip Code
75034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial Services

Occupation (for Individual)
SENIOR COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : AA9EF886AF095452EB32

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FOWLER, KAREN, R, ,

Mailing Address 8306 TURQUOISE

City
EL PASO

State
TX

Zip Code
79904-2513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Providence Memorial Campus

Occupation (for Individual)
CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : A489A0FB37E9F4E20A50

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PINKALL, JASON, , ,

Mailing Address 6526 ANITA ST

City
DALLAS

State
TX

Zip Code
75214-2706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
SENIOR COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

741.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : ABEB59B0E9CD14505869

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZERINGUE, NORMA, A, ,

Mailing Address 5757 SOUTHWESTERN BLVD

City
DALLAS

State
TX

Zip Code
75209-3437

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial Services

Occupation (for Individual)
SVP, STRATEGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AAD899DE9484C4512A21

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRYAN, MARK, H, ,

Mailing Address 17318 PAVAROSO ST

City

BOCA RATON

State

FL

Zip Code

33496-2581

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DELRAY COMMUNITY HOSPITAL

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AB238E88683FE4FC6879

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHEELER, TERRY, , ,

Mailing Address 13802 MAGNOLIA MANOR

City

CYPRESS

State

TX

Zip Code

77429-8162

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cypress Fairbanks Med Center

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

665.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A2ACA3E5107324C81A17

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: \$35.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

186.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SLOAN, GARY, J, ,

Mailing Address 615 STEVENS CT

City
DANVILLEState
CAZip Code
94506-4805FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
San Ramon Regional Medical CenterOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AFFA19273A9494E7897E

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KING, MICHAEL, J, ,

Mailing Address 2713 STUYVESANT CR

City
MODESTOState
CAZip Code
95356-0337FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GRIFFIN-SPALDING HOSPITALOccupation (for Individual)
CFO (POOL)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A9C3CA975DF864B82A3F

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, PAMELA, , ,

Mailing Address 5760 DANIEL RD

City
PLANOState
TXZip Code
75024-5914FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial ServicesOccupation (for Individual)
Sr Director, AR Management Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1824.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A7DD8E36817234988BC1

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

268.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MULLANY, JOSEPH, , ,

Mailing Address 2169 TOTTENHAM ROAD

City
BLOOMFIELD HILState
MIZip Code
48301-2332FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DMC-Harper University HospitalOccupation (for Individual)
CEO, Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1824.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	17	2016

Transaction ID : AE2DE0F1DBFE6481A951

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CARTER, RICHARD, D, ,

Mailing Address 5166 LAKE CREST CR

City
BIRMINGHAMState
ALZip Code
35226-3543FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BAPTIST HEALTH SYSTEMOccupation (for Individual)
CFO, Market/Sys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	17	2016

Transaction ID : A36F37AEF31F6479F8B0

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MASON, JENNIFER, A, ,

Mailing Address 5411 NE 22ND AVENUE

City
FORT LAUDERDALState
FLZip Code
33308-3224FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial ServicesOccupation (for Individual)
COMPLIANCE OFFICER SR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	17	2016

Transaction ID : A8DBFC9D90A5C4AF390E

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

268.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JORDAN, VICTOR, , ,

Mailing Address 314 VAILWOOD COURT

City
Bloomfield Hills

State
MI

Zip Code
48302-1573

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DMC-Harper University Hospital

Occupation (for Individual)
CFO, REGION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A219C16D1FB704747B05

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOLINARO, FRANK, , ,

Mailing Address 6783 W GREENBRIAR DRIVE
Suite 1400

City
GLENDALE

State
AZ

Zip Code
85308-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABRAZO ARROWHEAD CAMPUS

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A7999D8A445C54604AD4

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MALONEY, MICHAEL, , ,

Mailing Address 4514 WILDWOOD RD
Suite 1400

City
DALLAS

State
TX

Zip Code
75209-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
SVP, Acquisitions & Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A4C726E58FE904B81A78

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

194.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 53
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLEARY, MARY, , ,

Mailing Address 940 BONNIE BRAE PLACE

City
RIVER FOREST

State
IL

Zip Code
60305-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MacNeal Hospital

Occupation (for Individual)
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AEF3A0D1B549F48A9884

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEIERMANN, JAMES, , ,

Mailing Address 3560 DALLAS PARKWAY

City
FRISCO

State
TX

Zip Code
75034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial Services

Occupation (for Individual)
VP, OPS PERF & ANALYTICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A70EB57D56F024CF4BDA

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLMAN, LORI, , ,

Mailing Address 7213 ELLIS ROAD

City
FORT WORTH

State
TX

Zip Code
76112-4301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
Manager, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : ABD461553C141481A9EA

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BAILEY, CAROL, , ,

Mailing Address 20 BURTON HILLS BLVD

City
NASHVILLEState
TNZip Code
37215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

VP, Ops Reimbursement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A3065DCB26E3A426E9F8

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCNEW, RUSTY, , ,

Mailing Address 3141 LOVERS LANE

City
DALLASState
TXZip Code
75225-7720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

REG CHIEF NURSING EXEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : ADB07D072D9B34C10935

Amount of Each Receipt this Period

38.06

☐ Memo Item

Payroll Deduction: \$19.03/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEE, DEBRA, , ,

Mailing Address 1445 ROSS AVENUE

City
DALLASState
TXZip Code
75202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

VP, FINANCE PHYS DEVLPMPT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A5C84F4159C2B4B64B2A

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

308.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BORDOFSKE, DAVID, W, ,

Mailing Address 5001 ASHLAND BELLE LANE

City
FRISCOState
TXZip Code
75035-7682FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

VP, Patient Mgmt System

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A04848B01F58D4ED380C

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JORDAN, KENNETH, E, ,

Mailing Address 17331 ALMELO LANE

City

HUNTINGTON BEA

State

CA

Zip Code

92649-9046

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FOUNTAIN VALLEY REGIONAL HOSPITAL

Occupation (for Individual)

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AFFC4BB471A8C42B6BA7

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EVANS, JASON, E, ,

Mailing Address 3409 VILLANOVA STREET

City

DALLAS

State

TX

Zip Code

75225-6018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

CEO, Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

741.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A8333CC9A49C543CAA38

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

196.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 53
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SASSANO, DAVID, , ,

Mailing Address 10847 LOCHSPRING DRIVE

City
DALLAS

State
TX

Zip Code
75218-1201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
Director, Reg Phy Bus Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : A65D3E951B74C4155BCA

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MALONEY, PATRICK, , ,

Mailing Address 581 S ARLINGTON AVENUE

City
ELMHURST

State
IL

Zip Code
60126-4040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
West Suburban Medical Center

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : AA8A302721C73491CA8E

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ARMIN, CRAIG, C, ,

Mailing Address 23510 BERDON STREET

City
WOODLAND HILLS

State
CA

Zip Code
91367-3004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, GOVT PROGRAMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

760.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : A1891563B38CA448AA50

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

196.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALTER, MICHAEL, , ,

Mailing Address 141 RODNEY CIRCLE

City
BRYN MAWR

State
PA

Zip Code
19010-1312

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAHNEMANN HOSPITAL

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A1BDA7D11B43C4187ACA

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JOSEPHS, ALVIN, W, ,

Mailing Address 3717 HERWOL AVE

City
WACO

State
TX

Zip Code
76710-7218

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
Sr Director, Policy & Training

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A1CBA2B89334B41EBA04

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TYLER, CHRIS, , ,

Mailing Address 3560 DALLAS PARKWAY

City
FRISCO

State
TX

Zip Code
75034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial Services

Occupation (for Individual)
VP, Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AF278D833AF4A48B5A00

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

194.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHERROD, EDLECIA, , ,

Mailing Address 1955 MARKET CTR BD #2418

City
DALLASState
TXZip Code
75207-3480FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet HealthcareOccupation (for Individual)
Manager, Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A53F85A58C22D4A2B9D6

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASON, ALAN, R, ,

Mailing Address 2053 MOSSBERG DR.
Apt 1503City
PLANOState
TXZip Code
75023-5691FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet HealthcareOccupation (for Individual)
VP, UCC & Satellite Eds

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AAF6D38F1CDB248C8910

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUTHERLAND, KENNETH, F, ,

Mailing Address 1809 ST. PHILIP AVENUE

City
SOUTHLAKEState
TXZip Code
76092-8492FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet HealthcareOccupation (for Individual)
VP, Construction & Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

722.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AE6EAEB3857C14693880

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

152.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LINARES, MANUEL, , ,

Mailing Address 6801 SW 75TH AVE
Apt 901

City
MIAMI

State
FL

Zip Code
33143-3693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NORTH SHORE MEDICAL CENTER

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

722.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A5FFCB73E43AB400EB9B

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BREWER, DOUGLAS, , ,

Mailing Address 641 NORTH AVE N.E. #1407

City
ATLANTA

State
GA

Zip Code
30308-9582

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BROOKWOOD MEDICAL CENTER

Occupation (for Individual)
ASSOCIATE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A022D69524C4B448C8B7

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALDMANN, DANIEL, , ,

Mailing Address 1111 N. MONTCLAIR AVE

City
DALLAS

State
TX

Zip Code
75208-3520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
SVP, Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1824.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AA1442C5DEEC148BA99D

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

346.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SLAVIN, PAUL, , ,

Mailing Address 10912 CORTEZ CT.

City
FRISCOState
TXZip Code
75033-5345FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

VP, COMP BENF & CORP HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A08FCB87B690849BF82F

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KNOX, JOHN, , ,

Mailing Address 8327 WINE CUP HILL

City

SAN ANTONIO

State

TX

Zip Code

78256-2498

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BAPTIST HEALTH SYSTEM

Occupation (for Individual)

CEO-Chief Admin Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AA6C8B1C6D9EF4CD88EC

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAND, CHAD, W, ,

Mailing Address 310 LAKEWOOD DRIVE

City

TROPHY CLUB

State

TX

Zip Code

76262-5294

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

Director, Audit Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AA5F6FD0BD6F446AF9DB

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

114.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOREY, SCOTT, , ,

Mailing Address 4634 NORTH 36TH STREET
 Suite 1400

City
 PHOENIX

State
 AZ

Zip Code
 85018-2703

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 ABRAZO WEST CAMPUS

Occupation (for Individual)
 CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 17 / 2016

Transaction ID : A1EDE3309F30E4AE2940

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MACLAUCHLAN, STEVEN, , ,

Mailing Address 123 SUMMER STREET

City

WORCESTER

State

MA

Zip Code

01608

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 St. Vincent Hospital

Occupation (for Individual)
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 17 / 2016

Transaction ID : A88B312FFF6FC4C1CB08

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHACKO, BENSON, P, ,

Mailing Address 6308 LA POSTA

City

EL PASO

State

TX

Zip Code

79912-3040

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 PROVIDENCE SIERRA CAMPUS

Occupation (for Individual)
 COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 17 / 2016

Transaction ID : A7767D86BB6284FE5969

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

154.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PATTERSON, JANIE, , ,

Mailing Address 5572 SOUTHERN HILLS DR

City
FRISCO

State
TX

Zip Code
75034-1566

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial Services

Occupation (for Individual)
SVP, Revenue Cycle Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : ABA7EEBB973E64CB381E

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KARNUTA, DANIEL, M, ,

Mailing Address 981 PATRICIAN COURT

City
FARVIEW

State
TX

Zip Code
75069-8781

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial Services

Occupation (for Individual)
SVP, CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AB75413B6E9574871BBF

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERREIRA, MARGARET, , ,

Mailing Address 2972 HARROW ROAD

City
SPRING HILL

State
FL

Zip Code
34608-4429

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
SR SPEC, INPAT/CASE MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A66BA19E780D74383B26

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

156.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 53

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EUSEBIO, BARBARA, , ,

Mailing Address 82-814 PEMBROKE LANE

City
INDIO

State
CA

Zip Code
92201-9692

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
John F Kennedy Memorial Hospital

Occupation (for Individual)
CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : A7B603F983C8B4CB3BB4

Amount of Each Receipt this Period

57.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDREWS, AUDREY, T, ,

Mailing Address 702 PENFOLDS

City
COPPELL

State
TX

Zip Code
75019-4544

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
SVP, General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3648.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : A9451EE41852D4E9F8DF

Amount of Each Receipt this Period

384.00

☐ Memo Item

Payroll Deduction: \$192.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FINNEY, MICHELE, M, ,

Mailing Address 10010 W. VILLA LINDO DR.

City
PEORIA

State
AZ

Zip Code
85383-3486

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TENET PRACTICE RESOURCES

Occupation (for Individual)
CEO, Market/Sys

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

722.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : AD0C8B0EB574B4D609DE

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

517.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MICHAELS, MATTHEW, C, ,

Mailing Address 3507 MUNSTEAD TRAIL

City
FRISCOState
TXZip Code
75034-1166FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Patient Financial Services

Occupation (for Individual)

SVP, President, Revenue Cycle Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A64A1F8B71A8A4034A9F

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLM, STAN, , ,

Mailing Address 20996 W. CORA VISTA
Suite 1400

City

BUCKEYE

State

AZ

Zip Code

85396-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ABRAZO WEST CAMPUS

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A2DA2D2DF5BBA4990A75

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GRAH, JOHN, A, ,

Mailing Address 7933 CORNELL AVE

City

ST LOUIS

State

MO

Zip Code

63130-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LAKEWOOD REGIONAL MEDICAL CENTER

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

741.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A1AEB0FC302D4CEDAEI

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

194.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURPHY, TYLER, , ,

Mailing Address 108 LONDONBERRY TERR.

City
SOUTHLAKE

State
TX

Zip Code
76092-7321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : A4DC5E608FA324849818

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, LISA, , ,

Mailing Address 8524 MAJESTIC OAK COURT

City
MONTGOMERY

State
TX

Zip Code
77316-7657

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial Services

Occupation (for Individual)
Director, Mecs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : AF13516D4408A49F3B25

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLAYTON, KENT, G, ,

Mailing Address 125 BRANCH

City
IRVINE

State
CA

Zip Code
92618-4266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LOS ALAMITOS MEDICAL CENTER

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

722.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : A9EB192E40EEB4764879

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

152.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JOHNSON, ELIZABETH, , ,

Mailing Address 3302 MARSH LANE

City
GRAPEVINEState
TXZip Code
76051-6828FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet HealthcareOccupation (for Individual)
VP, APPLIED CLINICAL INF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

722.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AC725AD55B6614EE0B56

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILES, SHELLEY, , ,

Mailing Address 3803 STOCKTON LN

City
DALLASState
TXZip Code
75287-4919FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet HealthcareOccupation (for Individual)
Director, Relocation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AA302B58AB1F34575BD3

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: \$20.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRASHEAR, JAMES, , ,

Mailing Address 3560 DALLAS PARKWAY

City
FRISCOState
TXZip Code
75034FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial ServicesOccupation (for Individual)
SVP, General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A362D07F748D649E8927

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

308.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 53
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUNN, DINA, L, ,

Mailing Address 3717 CHERRY RIDGE DR

City
FRISCO

State
TX

Zip Code
75033-1328

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, HR Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A0690EF260AD54F7A868

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: \$25.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEINER, JOSEPH, , ,

Mailing Address 11226 POINTE COURT

City

SAINT LOUIS

State

MO

Zip Code

63127-1741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MacNeal Hospital

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A77A686F91C6F4DEEB87

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHICK, WESLEY, , ,

Mailing Address 6401 FITZGERALD DR.
#1400

City

PLANO

State

TX

Zip Code

75074-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
Sr Director, Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

741.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A58CB583627A84631A82

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KATZIN, DAVID, , ,

Mailing Address 3080 CANTERBERRY DRIVE

City
BOCA RATON

State
FL

Zip Code
33434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Florida Service Center

Occupation (for Individual)
Reg/Market CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A14BF5AACF1EE4B249BE

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HURT-DEITCH, SALLY, A, ,

Mailing Address 712 WALTHAM CT

City
EL PASO

State
TX

Zip Code
79922-2128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Providence Memorial Campus

Occupation (for Individual)
CEO, Market/Sys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A5AC4EC7FEAB84D3C87C

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction: \$50.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HONGOLA, MICHAEL, S, ,

Mailing Address 6704 WESTMONT DRIVE

City
COLLEYVILLE

State
TX

Zip Code
76034-7263

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, Erp Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

373.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AE40046E6B6DF446EB4D

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

176.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COCHRAN, WEBB, , ,

Mailing Address 3961 ST. CLAIRE CT

City
ATLANTA

State
GA

Zip Code
30319

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

Director, Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AC5D0A3D9C54E4F47A12

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LISA, MARK, P, ,

Mailing Address 179 NIBLICK ROAD #129

City

PASO ROBLES

State

CA

Zip Code

93446-2120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

TWIN CITIES COMMUNITY HOSPITAL

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AFF9F9F54DF084AC4847

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERRY, PHIL, , ,

Mailing Address 8195 LANDING SOUTH

City

Sandy Springs

State

GA

Zip Code

30350-2617

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

Reg/Market CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AC5A24FEC4DE54463810

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

234.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MALLET, CONRAD, , ,

Mailing Address 19386 CUMBERLAND WAY

City
DETROITState
MIZip Code
48203-1456FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DMC-Harper University HospitalOccupation (for Individual)
CAO - Detroit Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : A182643664AC848E5937

Amount of Each Receipt this Period

76.94

☐ Memo Item

Payroll Deduction: \$38.47/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLIS, DANA, , ,

Mailing Address 215 E QUINCY

City
SAN ANTONIOState
TXZip Code
78215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BAPTIST HEALTH SYSTEMOccupation (for Individual)
CMO Market/Sys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : ADD31AD12E8284183910

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BENZ, MARK, , ,

Mailing Address 1754 FORGE MOUNTAIN DR

City
VALLEY FORGEState
PAZip Code
19460-4630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARONDELET ST JOSEPHSOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : AC75C1FDE8A414EDFA19

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

192.94

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RANGEL JR, ARTURO, , ,

Mailing Address 2101 PEASE STREET

City
HARLINGEN

State
TX

Zip Code
78550

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VALLEY BAPTIST MARKET

Occupation (for Individual)
Market VP, Lean-Qual-Perfrm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AB02FEF511A2D4642BA6

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FALKE, JEREMY, D, ,

Mailing Address 1701 NATURAL BRIDGE DR

City
FRISCO

State
TX

Zip Code
75034-1229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, Talent, Cult&Perf Sys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AF1AFEB8DA2344E999B5

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ARCHER, DAVID, L, ,

Mailing Address 2594 HOCKETT COVE

City
GERMANTOWN

State
TN

Zip Code
38139-6655

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
St. Francis Hospital

Occupation (for Individual)
MARKET CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1824.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A1C1A233290804E59BA5

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

308.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEITER, AMY, , ,

Mailing Address 1601 W ST MARYS RD

City
TUCSON

State
AZ

Zip Code
85745

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Carondelet St Marys Hospital

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AACCB24CA2AA9449F80C

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADAMS, TIM, , ,

Mailing Address 808 PYRENEES DRIVE

City
SOUTHLAKE

State
TX

Zip Code
76092-2052

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
SVP, Ops Integration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1824.00

Date of Receipt

09 / 17 / 2016

Transaction ID : ABA5567218F314C6B805

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PUTHOFF, TIMOTHY, , ,

Mailing Address 3910 BODEN LANE
Suite 1400

City
SPRING

State
TX

Zip Code
77386-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOUSTON NORTHWEST MEDICAL

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

741.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A1FC8CF69148A49E1962

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

348.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PITTS, KEITH, , ,

Mailing Address 4441 S. VERSAILLES AVE

City
Dallas

State
TX

Zip Code
75205-3012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VICE CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3648.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : A8C8A26AA0FC84EDA841

Amount of Each Receipt this Period

384.00

☐ Memo Item

Payroll Deduction: \$192.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EWALD, LUANNE, , ,

Mailing Address 232 MIDLAND BLVD

City
ROYAL OAK

State
MI

Zip Code
48073-2670

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DMC-Children's Hospital of Michigan

Occupation (for Individual)
DBD-ASSOC ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.64

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : A2E1B0757F71D41F9B2D

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RODRIGUEZ, RUBEN, O, ,

Mailing Address 6905 VILLA HERMOSA

City
EL PASO

State
TX

Zip Code
79912-2341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PROVIDENCE EAST CAMPUS

Occupation (for Individual)
Director, Plant Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

741.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : A382EEDFCF8EF4227BE6

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DEONARINE, LEONARD, , ,

Mailing Address 1129 WISHING WELL CT

City
CEDAR HILL

State
TX

Zip Code
75104-8255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
Director, Business Continuity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A14A9388BBFF548DB8F8

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALEXANDER, JASON, P, ,

Mailing Address 22 ISLE OF HOPE RD

City
MOUNT PLEASANT

State
SC

Zip Code
29464-5500

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
East Cooper Community Hospital

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AD63DFD69973B4ABF961

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CASTRO, DAWN, , ,

Mailing Address 15408 FOX MEADOW LANE

City
FRISCO

State
TX

Zip Code
75035-3671

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial Services

Occupation (for Individual)
VP, CLIENT DELIVERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

661.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : ACF973D6367E14A80AF7

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

154.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MARTIN, THALIA, , ,

Mailing Address 3802 SACO WAY
Suite 1400City
EL PASOState
TXZip Code
79928-2703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PROVIDENCE EAST CAMPUSOccupation (for Individual)
Network Director, CQI Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A9C6D9E6A2EE547289C6

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TEDESCHI, ANTHONY, , ,

Mailing Address 115 CHRISTINA CIRCLE

City
WHEATONState
ILZip Code
60189-3115FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Weiss Memorial HospitalOccupation (for Individual)
CEO, Market/Sys

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AA95DCD3E86CE4E9AA23

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GLANCEY, RICHARD, E, ,

Mailing Address 4418 SAINT ANDREWS BLVD

City
IRVINGState
TXZip Code
75038-1709FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet HealthcareOccupation (for Individual)
Director, Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

741.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AD93DE0ECFCA54D70ABE

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

154.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 53

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOONEY, STEPHEN, M, ,

Mailing Address 11549 CROMWELL CIRCLE

City
DALLAS

State
TX

Zip Code
75229-7503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Patient Financial Services

Occupation (for Individual)
PRESIDENT, CONIFER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1254.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AE86CD2FB498048EE83B

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRAF, ANDREAS, M, ,

Mailing Address 3975 STOCKTON LANE

City
DALLAS

State
TX

Zip Code
75287-4921

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
Manager, Travel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A65720A7380AF4B8B88E

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ADKINS, MICHAEL, , ,

Mailing Address 710 CYPRESS CREEK PKWY

City
HOUSTON

State
TX

Zip Code
77090

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOUSTON NORTHWEST MEDICAL

Occupation (for Individual)
COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A4A702CF0392445A5BAC

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

308.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 53
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ESTRELLA, MARIO, , ,

Mailing Address 4920 NE STALLINGS DRIVE

City
NACOGDOCHESState
TXZip Code
75965-3722FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NACOGDOCHES MEDICAL CENTEROccupation (for Individual)
CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : AF6037ED1538F45C486C

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MITCHELL, DANIEL, , ,

Mailing Address 1130 22ND STREET SOUTH

City
BIRMINGHAMState
ALZip Code
35205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BAPTIST HEALTH SYSTEMOccupation (for Individual)
Director, Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : AC863F65ED4B84EE6849

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOURY, JEFFREY, , ,

Mailing Address 712 1/2 NARCISSUS AVE

City
CORONA DEL MARState
CAZip Code
92625-4210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet HealthcareOccupation (for Individual)
CEO, Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

722.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2016

Transaction ID : AF980D3EEE07B40959BA

Amount of Each Receipt this Period

76.00

☐ Memo Item

Payroll Deduction: \$38.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

192.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CERVANTES, CONLEY, S, ,

Mailing Address 819 CAMBRIDGE MANOR LANE

City
COPPELL

State
TX

Zip Code
75019-6105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
Sr Director, Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A4D14BAB8EFF1419095A

Amount of Each Receipt this Period

24.00

☐ Memo Item

Payroll Deduction: \$12.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EADIE, REGINALD, , ,

Mailing Address 246 KEELSON DRIVE

City
DETROIT

State
MI

Zip Code
48215-1283

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DMC-Harper University Hospital

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.56

Date of Receipt

09 / 17 / 2016

Transaction ID : AE894680BECCF4C3B9C6

Amount of Each Receipt this Period

38.48

☐ Memo Item

Payroll Deduction: \$19.24/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBERTS, MARK, , ,

Mailing Address 13047 W ESTERO LN

City
LITCHFIELD PAR

State
AZ

Zip Code
85340-5576

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
SR SPEC, INPAT/CASE MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

741.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A0BC10E0086464C6C8A8

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HONTS, JR., GARY, L.,

Mailing Address 78795 SAINT THOMAS DRIVE

City
BERMUDA DUNES

State
CA

Zip Code
92203-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
John F Kennedy Memorial Hospital

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1824.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : A6AF5D838360E43E18D9

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COVARRUBIAS, MARITA, ,

Mailing Address 7115 WILDGROVE AVE

City
DALLAS

State
TX

Zip Code
75214-3841

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, ASST GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : AA730D25FB1754027BA9

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RABE, DOUGLAS, E.,

Mailing Address 7746 EAGLE TRAIL

City
DALLAS

State
TX

Zip Code
75238-4115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

741.00

Date of Receipt

MM / DD / YYYY
09 / 17 / 2016

Transaction ID : AF633700079BC4907B18

Amount of Each Receipt this Period

78.00

☐ Memo Item

Payroll Deduction: \$39.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

308.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 53
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TURNER, JOHN, , , Jr.

Mailing Address 708 LAND FALL DRIVE

City
Rock Hill

State
SC

Zip Code
29732-9437

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
Sr Director, Practice Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A3350306DA4C541B085A

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONES, TARA, , ,

Mailing Address 24 SURREY LANE

City
NATICK

State
MA

Zip Code
01760-5200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A9175449018DE405C8F2

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. QUIAMBAO, CEZAR, L, ,

Mailing Address 845 BRISA DEL MAR

City
EL PASO

State
TX

Zip Code
79912-1513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Providence Memorial Campus

Occupation (for Individual)
Director, Respiratory Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AA4983B3D24594E5F872

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 53
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DALEY, DEBORAH, , ,

Mailing Address PO Box 757

City
Edgewood

State
TX

Zip Code
75117-0757

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TENET HEALTHCARE CORPORATION

Occupation (for Individual)
ASST - ADMINISTRATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AF60A8BE4F0FA4D148E7

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: \$20.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUFF, GARY, K, ,

Mailing Address 1724 BYRON NELSON PKWY

City
SOUTHLAKE

State
TX

Zip Code
76092-8868

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
SVP, Physician Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1824.00

Date of Receipt

09 / 17 / 2016

Transaction ID : ADCC0A3382F0A4548933

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, JEREMY, , ,

Mailing Address 111 S. PORT ROYAL DRIVE
Apt 19

City
HILTON HEAD

State
SC

Zip Code
29928-2839

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HILTON HEAD HOSPITAL

Occupation (for Individual)
MARKET CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

760.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A4E277BEAEA984C85BD0

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: \$40.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

312.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KATZ, DAVID, , ,

Mailing Address 363 ST. CLAIR

City
GROSSE POINTE

State
MI

Zip Code
48230-1501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
Director, Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

09 / 17 / 2016

Transaction ID : AEDA1A5B57FE64189A23

Amount of Each Receipt this Period

38.46

☐ Memo Item

Payroll Deduction: \$19.23/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOLF, THOMAS, , ,

Mailing Address 2613 MILLINGTON DRIVE

City
PLANO

State
TX

Zip Code
75093-3560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
Manager, Reimbursement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A56105282339C4118B62

Amount of Each Receipt this Period

32.00

☐ Memo Item

Payroll Deduction: \$16.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STANHILL, KEITH, , ,

Mailing Address 2819 WEDGEWOOD DRIVE

City
PASO ROBLES

State
CA

Zip Code
93446-5436

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TWIN CITIES COMMUNITY HOSPITAL

Occupation (for Individual)
CHIEF HR OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A7690939361294DE1AA5

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 53
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BIERMAN, JR., MICHAEL, J. ,

Mailing Address 18 CENTER CT

City
HEATH

State
TX

Zip Code
75032-5999

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, OPS FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : A9BBFE7E8302C43E29BB

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEFFLER, BARRY, , ,

Mailing Address 4123 WYCLIFF AVE

City
DALLAS

State
TX

Zip Code
75219-3005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

09 / 17 / 2016

Transaction ID : ABC62A0A9B44847F3B0F

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MESCO, EDWARD, , ,

Mailing Address 7365 NW 54TH STREET

City
LAUDERHILL

State
FL

Zip Code
33319-6346

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Florida Service Center

Occupation (for Individual)
Director, Reg Reimbursement

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AFE0FD79062FA407D87F

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASTANON, PAUL, A, ,

Mailing Address 6307 PRESTON PKWY

City
DALLASState
TXZip Code
75205-1650FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

VP, Deputy General Counsel & Corp Se

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A4A817CD9BDBC406BAF5

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVISON, COREY, L, ,

Mailing Address 1224 BLAIRWOOD DR

City
FLOWER MOUNDState
TXZip Code
75028-3617FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

VP, GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1368.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : ACCBA2BDBB9D840F7996

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MONTONEY, MARK, , ,

Mailing Address 5541 HAWKS LANDING DRIVE

City
ARRINGTONState
TNZip Code
37014-7499FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tenet Healthcare

Occupation (for Individual)

CHIEF MEDICAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1824.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : AB9881B9402FA41F6BA4

Amount of Each Receipt this Period

192.00

☐ Memo Item

Payroll Deduction: \$96.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

422.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUNKLE, THOMAS, I, ,

Mailing Address 868B PENNOCK ST

City
PHILADELPHIA

State
PA

Zip Code
19130-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAHNEMANN HOSPITAL

Occupation (for Individual)
ASSOCIATE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2016

Transaction ID : AF90E5F42ABF34A5EBF9

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TURTON, KENDALL, , ,

Mailing Address 520 MADISON OAK DR

City
SAN ANTONIO

State
TX

Zip Code
78258

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
North Central Baptist Hospital

Occupation (for Individual)
CHIEF HR OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A898D542D1E8D44AB96F

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kelley, Susan, , ,

Mailing Address 5102 West Campbell Ave.

City
Phoenix

State
AZ

Zip Code
85031-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Abrazo Maryvale Campus

Occupation (for Individual)
Chief Nursing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : A354C93B0CF844DA693C

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

114.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 53

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KRETZSCHMAR, NORMA, , ,

Mailing Address 1445 ROSS AVENUE

City
DALLAS

State
TX

Zip Code
75202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tenet Healthcare

Occupation (for Individual)
VP, Fin Hosp Ops & Integ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

09 / 17 / 2016

Transaction ID : ABE628056F7004ECB8A6

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Worley, Nathan, , ,

Mailing Address 3280 Joe Battle Blvd.

City
El Paso

State
TX

Zip Code
79938-2622

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Hospitals of Providence East Campu

Occupation (for Individual)
Director, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

09 / 17 / 2016

Transaction ID : AB27AD567A1BF423B901

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: \$19.00/Bi-Weekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.00

8984.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 53

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Wyden for Senate

Mailing Address P.O. Box 3498

City
PortlandState
ORZip Code
97208-3498Purpose of Disbursement
Political Contribution

Candidate Name

Wyden, Ron, , Sen.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: OR

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9				2	6						2	0	1	6

FEC Identification Number

C S6OR00110**Transaction ID : B1FB955D89**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Grassley Committee

Mailing Address P.O. Box 1000

City
Des MoinesState
IAZip Code
50304-1000Purpose of Disbursement
Political Contribution

Candidate Name

Grassley, Chuck, , Sen.,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: IA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	9				2	6						2	0	1	6

FEC Identification Number

C S0IA00028**Transaction ID : B5BB932B26**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00

4000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Carlos Uresti Campaign

Mailing Address 9006 Walhalla

City
San AntonioState
TXZip Code
78221-3552Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

C**Transaction ID : B73A4B9560I**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kenneth Sheets for State RepresentativeMailing Address 6333 East Mockinbird Lane
Suite 147City
DallasState
TXZip Code
75214-2672Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

C**Transaction ID : B093562F0E8**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Angie Chen Button Campaign

Mailing Address 6914 Clear Springs Cir.

City
GarlandState
TXZip Code
75044-2828Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

C**Transaction ID : B759B60F79**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Bobby Guerra Campaign

Mailing Address 10213 N. 10th St.

City
McAllenState
TXZip Code
78504-9366Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C **Transaction ID : B1145B7218C**

Amount of Each Disbursement this Period

 500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Diego Bernal Campaign

Mailing Address 107 Kinder Dr.

City
San AntonioState
TXZip Code
78212-1060Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C **Transaction ID : B2742AD452E**

Amount of Each Disbursement this Period

 250.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jose Menendez CampaignMailing Address 7121 US HWY 90 W
Suite 240City
San AntonioState
TXZip Code
78227-3564Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C **Transaction ID : B6CD8692E/**

Amount of Each Disbursement this Period

 500.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 1250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Friends to Elect Christine M. Tartaglione

Mailing Address PO Box 52153

City
PhiladelphiaState
PAZip Code
19115-7153Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C**Transaction ID : B814E9BA44**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS FOR NELSON WOLFF

Mailing Address 6850 ROCK ROAD

City
SAN ANTONIOState
TXZip Code
78229Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C**Transaction ID : BB7B3A7DA7**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens for Vincent Hughes

Mailing Address 4601 MARKET ST. 1ST FLR

City
PhiladelphiaState
PAZip Code
19139-4636Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C**Transaction ID : B4C7A20A03**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Texans for Charles Schwertner

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Mailing Address PO Box 2448

City
GeorgetownState
TXZip Code
78627-2448Purpose of Disbursement
Other Political Contribution

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : B3FA027BC4**

Amount of Each Disbursement this Period

 500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cindy Burkett Campaign

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Mailing Address 226 Magic Ln.

City
SunnyvaleState
TXZip Code
75182-9348Purpose of Disbursement
Political Contribution

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : BFE84505581**

Amount of Each Disbursement this Period

 250.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of John Zerwas

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

Mailing Address P.O. Box 852

City
FuishearState
TXZip Code
77441Purpose of Disbursement
Political Contribution

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : B839B14753:**

Amount of Each Disbursement this Period

 500.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 1250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Four Price Campaign

Mailing Address 2606 S. Lipscomb St.

City
AmarilloState
TXZip Code
79109-2332Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C**Transaction ID : B0712067913**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Eddie Lucio Jr. Campaign

Mailing Address P.O. Box 5958

City
BrownsvilleState
TXZip Code
78523-5958Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C**Transaction ID : B0CC57AA98**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sarah Davis Campaign

Mailing Address 4203 Tennyson Street

City
HoustonState
TXZip Code
77005-2751Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C**Transaction ID : B1CBED200!**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Senator Juan 'Chuy' Hinojosa Campaign

Mailing Address 612 W. Nolana, Suite 410

City
McAllenState
TXZip Code
78504-3089Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C**Transaction ID : B6E727457A**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Royce West Campaign

Mailing Address 1133 Madison Street

City
DallasState
TXZip Code
75208Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C**Transaction ID : BBEC620599I**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Texans for Jason Villalba

Mailing Address P.O. Box 670368

City
DallasState
TXZip Code
75367-0368Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

C**Transaction ID : B62A547771!**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1750.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TENET HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Friends of Travis Clardy

Mailing Address 209 E. Main Street

City
NacogdochesState
TXZip Code
75961-5257Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

FEC Identification Number

C **Transaction ID : BD921CAE8C**

Amount of Each Disbursement this Period

 500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Garnet Coleman Campaign

Mailing Address PO Box 88140

City
HoustonState
TXZip Code
77288Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

FEC Identification Number

C **Transaction ID : BC2206EDE2**

Amount of Each Disbursement this Period

 500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Annie's List

Mailing Address P.O. Box 303277

City
AustinState
TXZip Code
78703-0055Purpose of Disbursement
Other

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

FEC Identification Number

C **Transaction ID : BD021E4FC2**

Amount of Each Disbursement this Period

 2500.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 3500.00 12750.00